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From: Neil R. Jetter

Date: June 2, 2006

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Fax Number: (571) 273-8300

Examiner: Sullivan, Julianne M.
Serial No.: 10/714,795
Inventors: LI, et al.
Docket No.: 5853-376

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- * Transmittal Form (1 page)
- * Reply to Office Action (14 pages)
- * Copy of International Preliminary Examination Report (6 pages)
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{WP309911,1}

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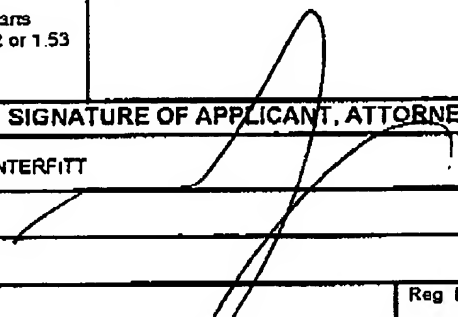
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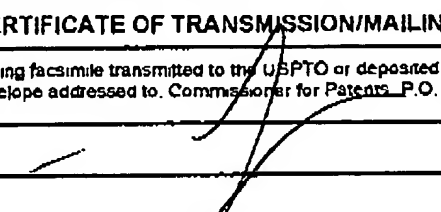
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/714,795
	Filing Date	November 17, 2003
	First Named Inventor	LI
	Art Unit	3737
	Examiner Name	Sullivan, Julianne M.
Total Number of Pages in This Submission	Attorney Docket Number	5853-376

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of International Preliminary Examination Report, and Fax Cover Sheet
Remarks The Commissioner is authorized to charge any fee deficiencies to Deposit Account No. 50-0951		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of Li et al.

Application No. 10/714,795 Examiner: Sullivan, Julianne M.

Filing Date: November 17, 2003 Group: 3737

For: MULTI-FREQUENCY MICROWAVE-INDUCED THERMOACOUSTIC IMAGING
OF BIOLOGICAL TISSUE

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Dear Sir:

This Reply is responsive to the Final Office Action dated March 9, 2006, in the above-identified application.

A full Claim set begins on Page 2 (no claim amendments herein).

Remarks begin on Page 5.

{WP304840,1}